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DATE: May 6, 2005

PTO IDENTIFIER: Application Number 10/726,625-Conf. #5742  
Patent Number

Inventor: Harry A. Dugger, III

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

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Attorney Dkt #: N9810.0033/P033

PAGES (Including Cover Sheet): 11

CONTENTS: Preliminary Amendment (8 pages)  
Amendment Transmittal (1 page)  
Certificate of Transmission (1 page)

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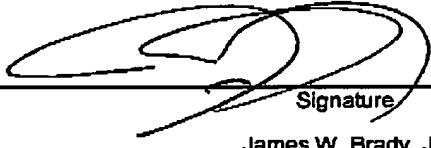
Application No. (if known): 10/726,625

Attorney Docket No.: N9810.0033/P033

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Preliminary Amendment (8 pages)  
Amendment Transmittal (1 page)

<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. N9810.0033/P033
Application No. 10/726,625-Conf. #5742	Filing Date December 4, 2003	Examiner M. Haghighatian	Art Unit 1616	
Applicant(s): Harry A. Dugger, III				
Invention: BUCCAL, POLAR AND NON-POLAR SPRAY OR CAPSULE CONTAINING DRUGS FOR TREATING PAIN				
<b>TO THE COMMISSIONER FOR PATENTS</b>				
Transmitted herewith is an amendment in the above-identified application.				
The fee has been calculated and is transmitted as shown below.				
<b>CLAIMS AS AMENDED</b>				
Total Claims	30	- 30 =	x	
Independent Claims	3	- 3 =	x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify):				
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b> 0.00				
<input type="checkbox"/> Large Entity	<input checked="" type="checkbox"/> Small Entity			
<input checked="" type="checkbox"/> No additional fee is required for this amendment.				
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 04-1073 as described below.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
Dated: May 6, 2005				
James W. Brady, Jr. Attorney Reg. No.: 32,115				
DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP 2101 L Street NW Washington, DC 20037-1526 (202) 775-4786				
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Dated: 5/6/05		Signature: 	(James W. Brady, Jr.)	

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Docket No.: N9810.0033/P033  
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Dated: <u>5/6/05</u>	Signature:  (James W. Brady, Jr.)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**In re Patent Application of:  
Harry A. Dugger, III**

**Application No.: 10/726,625**

**Confirmation No.: 5742**

**Filed: December 4, 2003**

**Art Unit: 1616**

**For: BUCCAL, POLAR AND NON-POLAR  
SPRAY OR CAPSULE CONTAINING  
DRUGS FOR TREATING PAIN**

**Examiner: M. Haghigheian**

**PRELIMINARY AMENDMENT**

**MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

**Dear Sir:**

**INTRODUCTORY COMMENTS**

**Prior to examination on the merits, please amend the above-identified U.S. patent application as follows:**

**Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.**

**Remarks/Arguments begin on page 8 of this paper.**

DSMDB.1918890.1